South Carolina 2016 List of Reportable Conditions

Attention: Health Care Facilities, Physicians, and Laboratories

South Carolina Law §44-29-10 and Regulation §61-20 require reporting of conditions on this list to the local public health department. South Carolina Law §44-53-1380 requires reporting by laboratories of all blood lead values in children under 6 years of age.

HIPAA: Federal HIPAA legislation allows disclosure of protected health information, without consent of the individual, to public health authorities for the purpose of preventing or controlling disease. (HIPAA 45 CFR §164.512)

! Immediately reportable by phone call to a live person at the regional public health office, 24/7

Urgently reportable within 24 hours by phone

All other conditions reportable within 3 business days

REPORT UPON RECOGNITION OF A SUSPECTED CASE, DIAGNOSIS, OR POSITIVE LABORATORY EVIDENCE (SEE "HOW TO REPORT" BELOW)

Suspected means clinical suspicion and/or initial laboratory detection, isolation, identification, or presence of supportive laboratory results.

Hepatitis B surface antigen + with each pregnancy

HIV 1 or HIV 2 positive test results (detection and

• Lab-confirmed cases (culture, RT-PCR, DFA, IFA) (2)

HIV and AIDS clinical diagnosis

HIV CD4 test results (all results) (L)

confirmatory tests)

HIV viral load (all results) (L)

HIV subtype, genotype, and phenotype (L)

HIV HLA-B5701 and co-receptor assay (L)

! Influenza A, avian or other novel strain

Influenza associated deaths (all ages)

• Lab-confirmed hospitalizations (7)

La Crosse Encephalitis (LACV) (5)

specimen

• Positive rapid antigen detection tests (7)

Lead tests, all results - indicate venous or capillary

Leprosy (Mycobacterium leprae) (Hansen's Disease)

♦ ! Any case that may be caused by chemical, biological. or radiological threat, novel infectious agent, or any cluster of cases, or outbreak of a disease or condition that might pose a substantial risk of human morbidity or mortality

* Animal (mammal) bites (6)

♦ ! Anthrax (Bacillus anthracis) (5) Babesiosis (Babesia microti)

1 Botulism (Clostridium botulinum or Botulinum toxin)

* Brucellosis (Brucella) (5) Campylobacteriosis (2)

Chancroid (Haemophilus ducreyi)

Chikungunya (5)

Chlamydia trachomatis

Ciguatera

Clostridium difficile (L)

Creutzfeldt-Jakob Disease (Age < 55 years only) Cryptosporidiosis (Cryptosporidium) Cyclosporiasis (Cyclospora)

* Dengue (5)

* Diphtheria (Corvnebacterium diphtheriae) (5)

* Eastern Equine Encephalitis (EEE) (5)

* Escherichia coli, Shiga toxin - producing (STEC) (5) Ehrlichiosis / Anaplasmosis (Ehrlichia / Anaplasma phagocytophilum)

Giardiasis (Giardia)

Gonorrhea (Neisseria gonorrhoeae) (2)

* Haemophilus influenzae, all types, invasive disease (H flu) (2)(3)(5)

* Hantavirus

* Hemolytic uremic syndrome (HUS), post-diarrheal

* Hepatitis (acute) A, B, C, D, & E Hepatitis (chronic) B, C, & D

Listeriosis (5) Lyme disease (Borrelia burgdorferi)

Leptospirosis

Legionellosis

Lymphogranuloma venereum Malaria (Plasmodium)

! Measles (Rubeola)

! Meningococcal disease (Neisseria meningitidis) (2) (3)

* Mumps

* Pertussis (Bordetella pertussis) ♦! Plague (Yersinia pestis) (5)

! Poliomvelitis

Psittacosis (Chlamydophila psittaci) ☆ * Q fever (Coxiella burnetii)

! Rabies (human)

Rabies Post Exposure Prophylaxis (PEP) when administered (6)

Rubella (includes congenital)

Rocky Mountain Spotted Fever (Rickettsia rickettsii) (Spotted Fever group)

Salmonellosis (2) (5)

Shiga toxin positive Shigellosis (2) (5)

♦! Smallpox (Variola)

Staphylococcus aureus, vancomycin-resistant or intermediate (VRSA/VISA) (2) (5)

Streptococcus group A, invasive disease (2) (3) Streptococcus group B, age < 90 days (2) Streptococcus pneumoniae, invasive (pneumococcal) (2)(3)

* St. Louis Encephalitis (SLEV) (5)

Syphilis: congenital, primary, or secondary (lesion or rash) or Darkfield positive

Syphilis: early latent, latent, tertiary, or positive serological test

Tetanus (Clostridium tetani)

Toxic Shock (specify staphylococcal or streptococcal)

* Trichinellosis (Trichinella spiralis) Tuberculosis (Mycobacterium tuberculosis) (5) (8)

★ * Tularemia (Francisella tularensis) (5)

Typhoid fever (Salmonella typhi) (2) (5)

* Typhus, epidemic (Rickettsia prowazekii)

* Vibrio, all types, including Vibrio cholerae O1 and O139 (5)

🔯 ! Viral Hemorrhagic Fevers (Ebola, Lassa, Marburg viruses)

* West Nile Virus (5)

Yellow Fever

Yersiniosis (Yersinia, not pestis)

Potential agent of bioterrorism

(L) Only Labs required to report.

1. An outbreak is the occurrence of more cases of disease than normally expected within a specific place or group of people over a given period of time. Clinical specimens may be required.

2. Include drug susceptibility profile.

3. Invasive disease = isolated from normally sterile site. Always specify site of isolate

4. Report Gram-negative diplococci in blood or CSF.

business day. Ship 3 day reportables within 3 business days. Contact local epi if assistance is needed Rabies PEP guidance: www.scdhec.gov/environment/envhealth/rabies/rabies-pep.htm. Consultation is available from the

DHEC Regional Public Health Office.

5. Specimen submission to the Bureau of Laboratories is required. Ship immediately and urgently reportables within 1

7. Report aggregate totals weekly.

Report all cases of suspect and confirmed tuberculosis (TB). A suspect case of TB is a person whom a health care provider believes, after weighing signs, symptoms, and/or laboratory evidence, to probably have TB. Centers for Disease Control and Prevention case definition of confirmed cases: https://wwwn.cdc.gov/nndss/conditions

What to Report

• Patient's name

• Patient's complete address, phone, county, date of birth, race, sex, last five digits of social security number

• Physician's name and phone number

Name, institution, and phone number of person reporting

• Disease or condition

Date of diagnosis

 Date of onset of symptoms • Lab results, specimen site, collection date

• If female, pregnancy status

• Patient status: In childcare, food-handler, health pcare worker, childcare worker, nursing home, prisoner/detainee, travel in last 4 weeks

How to Report —

HIV, AIDS, and STDs (excluding Hepatitis):

• Call 1-800-277-0873;

· Submit electronically via DHEC's web-based reporting system; or

Division of Surveillance & Technical Support Mills/Jarrett Complex

Lead:

Mail to:

Division of Children's Health Mills/Jarrett Complex 2100 Bull Street, Columbia, SC 29201

Box 101106, Columbia, SC 29211

• Fax: (803) 898-0577

Call (803) 898-0767 to establish electronic reporting.

Where to Report Tuberculosis

Report to the public health office (listed below) in the region in which the patient resides.

Lowcountry

Berkeley, Charleston Office: (843) 719-4612 Fax: (843) 719-4778

Allendale, Bamberg, Beaufort, Calhoun, Colleton, Dorchester, Hampton, Jasper, Orangeburg Office: (843) 549-1516 ext. 117 Fax: (843) 549-6845

Midlands

Chester, Kershaw, Lancaster, **Newberry, York** Office: (803) 909-7357 Fax: (803) 327-4391

Aiken, Barnwell, Edgefield, Fairfield, Lexington, Richland, Saluda

Office: (803) 576-2870 Fax: (803) 576-2880

Pee Dee

Dillon, Georgetown, Horry, Marion Office: (843) 915-8798 Fax: (843) 915-6504

Chesterfield, Clarendon, Darlington, Florence, Lee, Marlboro, Sumter, Williamsburg Office: (843) 673-6693

Fax: (843) 661-4844

<u>Upstate</u>

Cherokee, Greenville, Pickens, Spartanburg, Union Office: (864) 596-2227 ext. 108 Fax: (864) 282-4294

Abbeville, Anderson, Greenwood, Laurens, McCormick, Oconee Office: (864) 227-5955 Fax: (864) 942-3690

Nights/Weekends/Holidays: (803) 898-0558 Fax: (803) 898-0685

Where to Report All Other Conditions

Report all other conditions to the public health office (listed below) in the region in which the patient resides.

Immediate and Urgent Reporting (TELEPHONE)

Lowcountry Berkeley, Charleston, **Dorchester**

Beaufort, Colleton, Hampton, Jasper

Phone: (843) 953-0043

Phone: (843) 322-2453 Allendale, Bamberg, Calhoun, Orangeburg Phone: (803) 268-5833

Nights/Weekends Phone: (843) 441-1091

Midlands

Kershaw, Lexington, Newberry, Richland Phone: (803) 576-2749

Phone: (803) 286-9948 Aiken, Barnwell, Edgefield, Saluda

Chester, Fairfield,

Lancaster, York

Nights/Weekends Phone: (888) 801-1046

Phone: (803) 642-1618

Pee Dee

Chesterfield, Darlington, Dillon, Florence, Marion, Marlboro Phone: (843) 661-4830

Clarendon, Lee, Sumter Phone: (803) 773-5511

Georgetown, Horry,

Phone: (843) 915-8804

Williamsburg

Nights/Weekends Phone: (843) 915-8845

<u>Upstate</u>

Anderson, Oconee Phone: (864) 260-5801

Abbeville, Greenwood, Laurens, McCormick Phone: (864) 227-5947

Nights/Weekends

Phone: (866) 298-4442

Cherokee, Greenville, Pickens, Spartanburg, Union Phone: (864) 372-3133

Midlands

2000 Hampton Street Columbia, SC 29204 Fax: (803) 576-2993

Fax: (843) 953-0051

N. Charleston, SC 29405

Lowcountry

3-Day Reporting (MAIL or FAX)

4050 Bridge View Drive, Suite 600

145 E. Cheves Street Florence, SC 29506

Pee Dee

Fax: (843) 661-4859 **Upstate** 200 University Ridge

Greenville, SC 29602 Fax: (864) 282-4373

To learn about DHEC's web-based reporting system, call 1-800-917-2093.

